

c/o National Family Planning & Reproductive Health Association 1627 K St. NW, 12th Floor Washington, DC 20006 Phone: 202-293-3114

March __, 2015

The Honorable Roy Blunt
Chairman
Appropriations Subcommittee on
Labor, Health and Human Services
and Education
260 Russell Senate Office Building
Washington, DC 20510

The Honorable Tom Cole
Chairman
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
House Appropriations Committee
2467 Rayburn House Office Building
Washington, DC 20515

The Honorable Patty Murray
Ranking Member
Appropriations Subcommittee on
Labor, Health and Human Services
and Education
154 Russell Senate Office Building
Washington, DC 20510

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
House Appropriations Committee
2413 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Blunt, Ranking Member Murray, Chairman Cole, and Ranking Member DeLauro:

As you develop Fiscal Year (FY) 2016 appropriations for the Departments of Labor, Health and Human Services, Education, and related agencies, the ____ undersigned members of the Family Planning Coalition respectfully request that you provide \$327 million in funding for the Title X family planning program. Title X is the sole source of dedicated federal funding for family planning services for underserved populations. Strong support for the program is incredibly important given that four out of ten women who receive care at a Title X-funded health center consider it their only source of health care and six in ten women consider it their main source of care. Moreover, more than 4.5 million women and men access life-saving health care such as birth control, cancer screenings, and testing for sexually transmitted infections through Title X health centers.

The organizations listed below collectively represent millions of administrators, providers, patients, researchers, and advocates who share the common mission of supporting and protecting federal funds for critical, cost-saving programs that provide family planning services to millions of women, men and families. By expanding support for the Title X family planning program you will help protect access to the public health safety net for millions of poor and low-income women and men in need of high-quality health services.

The President's FY 2016 budget requested \$300 million for Title X, signaling the Administration's support for and recognition of the value that Title X provides to communities across the country. Even as more individuals gain health care coverage through the Affordable Care Act (ACA), the Title X health center network will continue to play an essential role in our nation's service delivery framework. Research examining the use of Title X health centers six years after Massachusetts enacted state-level health care reform shows that insurance coverage expanded for most people, but low-income women of reproductive age continued to need and seek care at Title X health centers.ⁱⁱⁱ In fact, early indications showed that visits to Massachusetts safety-net providers grew by 31%iv. Increased federal funding for Title X will reinforce the network's capacity to provide care to those desperately in need.

Title X also sets the standard for quality family planning and sexual health service provision—focusing on outcomes and increasing service efficiency. In April 2014, the program issued "Providing Quality Family Planning Services – Recommendations of CDC and the U.S. Office of Population Affairs," that outlines the most up-to-date clinical recommendations for all providers of family planning care, including Title X-funded providers, to help define patient-centered, quality care in a family planning visit. Such efforts reinforce the network's role as centers of excellence for high-quality health care.

Unfortunately, Title X has suffered devastating budget cuts in recent fiscal years. Between FY2010-FY2013, funding for Title X was cut by \$39.2 million (-12.3 percent), including nearly \$15 million due to sequestration alone. Over that same three-year period, the total number of Title X patients shrunk from 5.22 million to 4.6 million, with no indication that patients sought care elsewhere. While Congress restored \$8.2 million in FY2014, funding Title X at \$286.5 million, total funding still remained less than the FY2013 pre-sequestration enacted level of \$296.8 million. Title X was again funded at only \$286.5 million in FY2015.

These cuts have also made it difficult for Title X to support the infrastructure necessary for modern service delivery. Traditionally, Title X health centers have been excluded from other funding sources that support the implementation of health information technology (HIT). Resources for electronic health record (EHR) implementation for Title X providers, similar to their other safety net counterparts, are necessary to help achieve the ACA goal of having a nationwide HIT infrastructure and more coordinated models of care. Increased Title X funding is essential to help address the oversight made in the HITECH ACT which made many family planning health providers ineligible for the EHR incentives.

During these difficult economic times, our organizations encourage the Committees to invest in programs that both help low-income women and men access health care services and save critical taxpayers dollars. For every one dollar invested in publicly funded family planning services, over seven dollars are saved in Medicaid costs. Viii Additionally, services provided in Title X health centers alone yielded \$5.3 billion of the \$10.5 billion in total savings for publicly funded family planning in 2010. Vix We thank you for your consideration and urge you to include

at least \$327 million in FY2016 for the Title X family planning program. If you have any questions or would like additional information, please contact Burke Hays at the National Family Planning & Reproductive Health Association by email at bhays@nfphra.org or by phone at 202–293–3114 ext. 224 or Karen Stone at Planned Parenthood Federation of America by email at karen.stone@ppfa.org or by phone at 202–973–4834.

Sincerely,

ⁱ Rachel Benson Gold, Adam Sonfield, Cory L. Richards and Jennifer J. Frost, Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System, (New York: Guttmacher Institute, 2009), accessed 2015, http://www.guttmacher.org/pubs/NextSteps.pdf.

Christina Fowler, Julia Gable, Jiantong Wang, Family Planning Annual Report: 2013 National Summary, (Research Triangle Park, NC: RTI International, November 2014), http://www.hhs.gov/opa/pdfs/fpar-2013-national-summary.pdf.

ⁱⁱⁱ Marion Carter, Kathleen Desilets, Lorrie Gavin, Sue Moskosky, Jill Clark, Trends in Uninsured Clients Visiting Health Centers Funded by the Title X Family Planning Program — Massachusetts, 2005–2012 (Centers for Disease Control and Prevention (CDC)'s Morbidity and Mortality Weekly Report, January 24, 2014), accessed 2015, http://www.cdc.gov/mmwr/pdf/wk/mm6303.pdf.

Vibis Reproductive Health and Massachusetts Department of Public Health (MDPH) Family Planning Program. Low-income women's access to contraception after Massachusetts health care reform. MA: Ibis Reproductive Health and MDPH Family Planning Program, September 2009.

Yearnily Planning Annual Report: 2013 National Summary, (Research Triangle Park, NC: RTI International, November 2014), http://www.hhs.gov/opa/pdfs/fpar-2013-national-summary.pdf.

vi Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System, (New York: Guttmacher Institute, 2009), accessed 2015, http://www.guttmacher.org/pubs/NextSteps.pdf.

vii Certification and EHR Incentives: HITECH Act, US Government's official website for Health Information Technology, accessed 2015, http://www.healthit.gov/policy-researchers-implementers/hitech-act-0.

yiii Jennifer J. Frost, Adam Sonfield, Mia R. Zolna, and Lawrence B. Finer, "Return on Investment: A Fuller Assessment of the Benefits and Cost Savings of the US Publicly Funded Family Planning Program," Milbank Quarterly 92, no. 4 (2014): 667-720.

^{ix} Jennifer J. Frost, Mia R. Zolna and Lori Frohwirth, Contraceptive Needs and Services, 2010, (New York: Guttmacher Institute, July 2013), http://www.guttmacher.org/pubs/win/contraceptive-needs-2010.pdf.